SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	X Clan allettrin Agent Addressee
1. Article Addressed to: Alan M. Patterson 1263 Westgate Pkwy Dothan, AL 36303	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	3. Service Type  XXCertified Mail □ Express Mail □ Registered □ Receipt for Merchandise □ Insured Mail □ C.O.D.
1:00cv142 (cmp summ 20 Dyp	Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label)  Z 525 226 742	
PS Form 3811, July 1999 Domestic Retu	urn Receipt 102595-99-N-1789